

UTILITY PATENT

Attorney Docket APPLICATION 2132.038

TRANSMITTAL

FIRST NAMED INVENTOR

OR APPLICATION IDENTIFIER

for nonprovisional applications under 37 CFR 1.53(b) Inventor Jackowski et al

TITLE: BIPOLAR MARKER INDICATIVE OF DISEASE STATE HAVING A MOLECULAR WEIGHT OF 1525 DALTONS

EXPRESS MAIL LABEL NO.: EI608094606US Date submitted: 04/30/01

APPLICATION ELEMENTS

Assistant Commissioner for Patents

(See MPEP chapter 600 concerning utility patent appln.)			Box Patent Application					
1	v	Fee Transmittal Form	Washington, D.C. 20231 6. Microfiche Computer Program (Appendix)					
l.		•						
	(Submit an original, and a duplicate for fee processing) X Specification 36 Total Pages 7. Nucleotide and/or Amino Acid Sequence Submiss							
		(preferred arrangement set forth below)	(if applicable, all necessary)					
		-Descriptive title of the Invention	a Computer Readable Copy					
		-Cross References to Related Applications	b. Paper Copy (Identical to computer copy)					
		-Statement Regarding Fed sponsored R&D	c. Statement verifying identity of above copies					
		-Reference to Microfiche Appendix						
		-Background of the Invention	ACCOMPANYING APPLICATION PARTS:					
		-Brief Summary of the Invention	8 Assignment Papers (copy)					
		-Brief Description of the Drawings (if filed)	9 37 CFR 3.73(b) Statement Power of Attorney					
		-Detailed Description	10 English Translation Document (if applicable)					
		-Claim(s)	11 Information Disclosure Copies of IDS					
		-Abstract of the Disclosure	Statement (IDS)/PTO-1449 Citations					
3.	X	Drawing(s) (35 USC 13) 2 New Sheets	12 Preliminary Amendment					
4.	X		13. X Return Receipt Postcard (MPEP 503)					
		a Combined Executed (original or copy)	14 Small Entity(2) Statement filed in prior					
		for C-I-P application)	(Unsigned) Statement(s) Application					
		b Copy from a prior appln. (37 CFR 1.						
		(for continuation/divisional with Box 17 comp						
			15 Certified Copy of Priority Document(s)					
		I Deletion of Inventor(s)						
Signed statement attached deleting 16 Other:								
		inventor(s) named in the prior applican	tion,					
_		see 37 CFR 1.63(d)(2) and 1.33(b)	h is shooked)					
5.		Incorporation By Reference (useable if Box 4)						
	The entire disclosure of the prior application, from which a							
copy of the Oath or Declaration is supplied under Box 4b, is considered as being part of the disclosure of the								
accompanying application and is hereby incorporated								
		by reference therein.	portion					
17	Ifa	CONTINUING APPLICATION, check app	ropriate box and supply the requisite information:					
-	Cor	ntinuation Divisional Continuation	on-in-part (CIP) of prior application No.					
		18. CORRES	SPONDENCE ADDRÉSS //					
Cι	istom	er Number or Bar Code Label o	r X Correspondence address below					
		(Insert Customer No. Or Attach ba	ar code label here Cast. #21917 //					
N	AME:	Michael A. Slavin						
		McHale & Slavin, P.A.	I for () //h					
ΑI	DDRE	ess: 4440 PGA Blvd., Suite 402						
CI	TY:	·	ATE: FL ZIP CODE: 33410					
	DUNT		ONE: (561) 625-6575 FAX: (561) 625-6572					
SI	END	TO: Assistant Commissioner for Patent	ts, Box Patent Application, Washington, DC 20231					

FEE TRANSMITTAL for FY2001	Appli	cation	Numb	er:N	J/A					
	Filing Date : N/A									
	First Named Inventor: Jackowski et al									
Date: 04/30/01	Group Art Unit : N/A									
	Exan	iner N	lame	: 1	N/A					
Total Amount DUE: \$ 355.00	Attorney Docket No. 2132.038									
METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)									
1 The Commissioner is hereby authorized to charge	3. AD	DITIO	NAL FE	ES:						
the filing fees and any additional fees to:			· · ·	G1	1 martin					
Deposit:	Fee	Large Fee	Entity Fee	Smai Fee	1 Entity FEE DESCRIPTION					
Account No.	Code	(\$)	Code	(\$)	TEE DESCRIPTION					
Deposit Account Name:	105	130	205		Surcharge - late filing fee/oath					
Charge any additional Applicant claims small	127	50	227	25	Surcharge - late provisional					
Fee required under entity status. See. 37 CFR					filing fee or cover sheet.					
37 CFR 1.15 and 1.17 1.27	139	130	139	130	Non-English specification					
	147	2520	147		For filing a Request. for Exam.					
2. X Payment Not submitted	112	920*	112	920*	Req. publication of SIR prior					
Check Money Order Other					Examiner Action					
FEE CALCULATION	115	110	215	55	Extension - first month					
1. FILING FEE	116	400	216	200	Extension - second month					
	117	950	217	475	Extension - third month	—				
Large Entity Small Entity	118	1510	218	755	Extension - fourth month					
Fee Fee Fee FEE DESCRIPTION/FEE PAID	128	2060 310	228 219	1030 155	Extension - fifth month Notice of Appeal					
Code (\$) Code (\$)	120	310	220	155	Brief in support of Appln.					
101 710 201 355 Utility filing fee 355	21	270	221	135	Req. for Oral Hearing					
106 320 206 160 Design filing fee	138	1510	138	1510	Petition to Institute Public	_				
107 490 207 245 Plant filing fee	130	1310	130	1510	Use Proceeding					
108 710 208 355 Reissue filing fee	1.40	110	240	55	Pet. to revive - unavoidable					
114 150 214 75 Provisional filing fee	140	110	240		Pet. To revive - unintentional					
SUBTOTAL(1) <u>\$355.00</u>	141	1320	241	660						
Fee from	142	1320	242	660	Utility Issue Fee					
2. CLAIMS Extra below Fee Paid	143	450	243	225	Design Issue Fee Plant Issue Fee					
Total Claims $2 20 = -3 x 9 = -0	144	670	244	335						
Independent $\frac{1}{2} - 3 = \frac{1}{2} - 3 = \frac{1}{2} - \frac{1}{2} = \frac{1}$	122	130	122		Petitions to Commissioner					
Multiple Dep 0 $x = $-0-$	123	50	123	60						
Claims	126	240	126 581	240	Sub. Of Infor. Discl. Stm Record. Patent Assign	—				
Large Entity Small Entity	581	40	361	40	Per property					
Fee Fee Fee FEE DESCRIPTION	1.16	200	246	205	Filing a Submission After _					
Code (\$) Code (\$)	146	290	240	393	Final rejection (37 CFR .129)	(a)				
103 22 203 11 Claims in excess of 20	2 140	700	240	20	5 For each addnl. invention	(4)				
102 82 202 41 Ind. Claims in excess of	3 149	790	249		be examined (37 CFR 1.129(b)					
104 270 204 135 Mult. Dependent claim	•	····	:_:1 T			_				
109 82 209 41 Reissue Independent Cla										
110 22 210 11 Reissue Claims in excess		ner tee	e (spec	цу)						
20 and over original pate			птот	A T (0)	מז און אוייין אייין אייי					
FEE SUBTOTAL(2) \$ 355.00 Reduced by Basic filing fee SUBTOTAL(3) SUBMITTED BY:										
Michael A. Slavin				3.7	24.016					
Typed or printed Name. Michael A. Slavin			Re		. 34,016					

CERTIFICATE OF EXPRESS MAIL

Express Mail Mailing Label: EL608094606US

I HEREBY CERTIFY that the following correspondence: UTILITY APPLICATION
TRANSMITTAL; FEE CALCULATION SHEET; APPLICATION, INCLUDING CLAIMS; 2 SHEETS
OF DRAWINGS; DECLARATION/POWER OF ATTORNEY (unsigned); Mail Mailing Certificate;
RETURN-RECEIPT postcard; regarding the Application entitled: BIPOLAR MARKER INDICATIVE
OF DISEASE STATE HAVING A MOLECULAR WEIGHT OF 1525 DALTONS is being deposited with the United States Postal Service as EXPRESS MAIL, POST OFFICE TO ADDRESSEE, in an envelope addressed to:

Commissioner of Patents & Trademarks Box Patent Application Washington DC 20231

on APRIL 30, 2001

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code.

MCHALE & SLAVIN, P.A. 4440 PGA BLVD. SUITE 402 PALM BEACH GARDENS, FL 33410 (561) 625-6575 Cathy Nicholson Legal Assistant